



ATTORNEY DOCKET NO. 2001-0451.00/12016.0047U1  
PATENT

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re Application of: **Baker et al.** )  
Application No.: **10/086,985** ) Group Art Unit: **1734**  
Filed: **February 28, 2002** ) Examiner: **Lazor, Michelle A.**  
For: **"SYSTEM AND METHOD OF COATING** ) Confirmation No.: **6315**  
**PRINT MEDIA IN AN INKJET PRINTER"** )

**TRANSMITTAL LETTER**

MAIL STOP AF  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

NEEDLE & ROSENBERG, P.C.  
Customer No. 23859

Sir:

Transmitted herewith are the following in the above-identified application:

<input checked="" type="checkbox"/> Amendment	<input type="checkbox"/> Petition to Extend Time
<input type="checkbox"/> Fee as calculated below	<input type="checkbox"/> Supplemental Declaration
<input checked="" type="checkbox"/> No Additional Fee Required	<input type="checkbox"/> Terminal Disclaimer
<input type="checkbox"/> Corrected Drawings	<input checked="" type="checkbox"/> Other: <u>Return Postcard.</u>

CLAIMS AS AMENDED							
CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR		PRESENT EXTRA	RATE		ADDITIONAL FEE
Total Claims		20		46	0		X \$50.00
Independent Claims		2		8	0		X \$200.00
<input type="checkbox"/> First Presentation of a Multiple Dependent Claim					+ \$360.00		\$
EXTENSION FEE	1 <sup>st</sup> Month \$120 <input type="checkbox"/>	2 <sup>nd</sup> Month \$450 <input type="checkbox"/>	3 <sup>rd</sup> Month \$1020 <input type="checkbox"/>	4 <sup>th</sup> Month \$1590 <input type="checkbox"/>	5 <sup>th</sup> Month \$2160 <input type="checkbox"/>		\$
<input type="checkbox"/> Reduction by ½ for filing by SMALL ENTITY (Note 37 C.F.R. §1.9, §1.27, §1.28) -							-\$
						Total Fee Due	\$0.00

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Payment:

- A check in the amount of \$ \_\_\_\_\_ is enclosed.
- Payment by credit card in the amount of \$\*\*\*\* for the fees designated below. (Form PTO-2038 enclosed).
- WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.
- The Commissioner is authorized to charge our Deposit Account No. 14-0629 in the amount of \$ \_\_\_\_\_ to cover the above-listed additional fees. A duplicate copy of this transmittal is enclosed.
- In the event of an overpayment or improper payment of a required fee, the Commissioner is authorized to charge or credit our Deposit Account No. 14-0629 as required to correct the error.

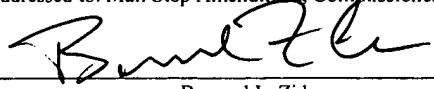
Respectfully submitted,  
NEEDLE & ROSENBERG, P.C.

  
\_\_\_\_\_  
Bernard L. Zidar  
Registration No. 48,620

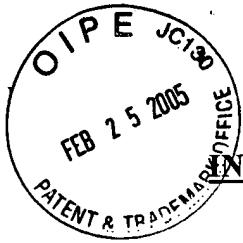
NEEDLE & ROSENBERG, P.C.  
Customer No. 23859  
678-420-9300  
678-420-9301 (fax)

**CERTIFICATE OF MAILING**

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.

  
\_\_\_\_\_  
Bernard L. Zidar

  
\_\_\_\_\_  
Date



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**AMENDMENT**

MAIL STOP AF  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

NEEDLE & ROSENBERG, P.C.  
Customer No. 23859

Sir:

In response to the Examiner's Final Action mailed November 22, 2004, please amend this application as follows.

**Amendments to the Claims** are reflected in the listing of claims which begins on page 2 of this Amendment.

**Remarks** begin on page 6 of this Amendment.